In New Jersey, individuals with mental illness are experiencing a housing crisis that impairs their ability to be independent and productive. Federal, state and local governments have a responsibility to address this crisis and we must keep them aware of it. This paper highlights reasons for the crisis and offers solutions.

**HOUSING AND CHOICE**

Like all individuals, people with mental illness have a need for decent, safe, affordable, and appropriate housing. Like all individuals, they vary in their interests, desires and needs over the span of their lifetime. People whose illness is acute or unstable may need highly structured and supervised housing for a period of time, which may be an alternative to hospitalization; and for a few, this need may last throughout their lifetime. However, the vast majority will recover the ability to live in supportive independent housing in the community, and these resources must be made available for them. For some people with disabilities, the need for affordable housing linked to services and supports lasts throughout their lifetime. For most people with disabilities, affordable housing simply means generic housing within the community, including rental apartments, condominiums, and single-family homes. MHANJ believes that each person should have the right to choose housing best suited to their needs, abilities, and interests. Consequently, we must promote barrier free, affordable, supportive housing separate from services.

**SUPPORTIVE HOUSING MODEL**

Supportive, independent housing is a commitment to persons with mental illness, which assures:

- A choice of barrier free, affordable, decent, permanent housing.
- Access to a flexible and responsive system of community supports that will assist them to maintain independence and a lifestyle of their choosing.

These community supports are essential to the success of supportive, independent housing. While they may vary in intensity from time to time, they must be considered as ongoing and be adequately and directly funded. The services include, but are not limited to, case management, linkage to community systems, rehabilitation, job coaching, crisis intervention and treatment, medication management, and peer counseling. The focus of these supports is to promote recovery in the community and prevent the need for the person to be sent to an institution. The United States Supreme Court noted in the Olmstead v L.C. decision that "confinement in an institution severely diminishes the everyday life activity of individuals including family relations, social contacts, work options, economic independence, educational advancement and cultural enrichment". Because involvement in these activities is essential to recovery, institutionalization should be prevented by every means possible.

An additional reason to prevent institutional isolation is that the isolation itself is the cause of stigma, which hinders recovery. The Supreme Court states "institutional placement of persons who can handle and benefit from community settings perpetuates unwarranted assumptions that persons so isolated are incapable and unworthy of participating in community life".
Additionally, the court required that treatment be provided in "the most integrated setting appropriate to the needs of qualified individuals with disabilities". Consequently, the residential option of choice is community housing with supports. Other options, such as group homes and supervised apartments, may be prescribed only when it is clear that the person requires the intense supervision and restrictions on their liberty, that this provides. Furthermore, it is not to be presumed that a person who has a difficult time adjusting to an institution must go to a group home to prepare them for community housing. Experience has shown that the communal living imposed by institutions and group homes aggravates some person's illness and they can sometimes thrive in the atmosphere of independent living, when they are offered supports of their choice.

**DISCRIMINATION**

Discrimination is a barrier to affordable housing. We believe the affordable housing delivery system has been resistant to expand housing opportunities far people with disabilities, and rarely directs housing resources to address their needs because of a lack of information and understanding of the housing needs of people with disabilities, the stigma associated with having a disability, and continuing discrimination within the affordable housing delivery system. Additionally, persons with disabilities frequently encounter resistance, often unlawful, from local zoning boards. Evidence of these issues is:

- The National CCD Housing Task Force Report "Open Doors" has documented that HUD undercounts and underestimates the housing need for persons with disabilities, as do local housing authorities, and that while their need for housing is proportionally twice that of elderly persons, who also have a severe housing shortage, persons with disabilities receive only half as much proportional funding.
- The [Community Health Law Project](#) has documented that New Jersey developers of housing frequently ignore the Construction Code requirements that assure barrier free accessibility to persons with disabilities.
- A recent federal court ruling has indicated that many New Jersey municipalities have laws in contradiction to federal protections, which are designed to assure housing options for persons with disabilities and prevent discriminatory practices.

**GENERAL HOUSING STRATEGIES AND CONCERNS REGARDING NEW JERSEY HOUSING POLICY**

To assure the needs of persons with mental illness are met, planning must be coordinated by the State agencies, public housing authorities, counties and municipalities. This planning process must involve persons with disabilities, their family members, providers and advocates. They must prioritize resources and establish policies that encourage developers to develop permanent, affordable and supportive housing opportunities for persons with disabilities.

- The State Departments of Community Affairs and Human Services should work together, coordinating their funding, to assure they provide permanent, affordable and supportive housing for persons with disabilities. We endorse the efforts made so far.
- We need greater funding for the Balanced Housing program. Municipalities should be encouraged to address their responsibility regarding the Fair Housing Act (COAH) through 100% affordable housing.
- Housing and Mortgage Finance Agency (HMFA) should maintain the set-aside of the Tax Credits for special needs populations. HMFA recently doubled the amount of tax credits for people with special needs.
- A mechanism should be established so that when Public Housing Authorities open the application process for Section 8 certificates or vouchers under HUD’s Designated Housing Plan NOFA, notice is given to interested parties with a client base that would be eligible.
- Encourage the mental health community to be involved in the Consolidated Plan process in order to assure that the housing needs of people with mental illness are addressed. Consolidated Plans are developed by counties, the state and some municipalities. They are to identify and address the need for affordable housing and supportive services. They determine how HUD money gets spent.
• Promote lease-based housing. People with mental illness have the right to live in settings where they control their lives to the fullest extent possible. This requires leased-based housing where they are tenants, with tenant rights and responsibilities rather than congregate living arrangements where they are residents, under the control of the service provider. To the greatest extent possible, housing should be offered without coercing consumers into accepting services just so they qualify for housing.
• Protect the Fair Housing Act.
• Support the establishment of measurable outcomes to validate the efficacy of community living for people with mental illness.
• Encourage home ownership whenever desired and possible, especially by urging New Jersey to establish the norm that will allow the use of Section 8 vouchers for mortgages provided in Federal Law.

**LONG RANGE ISSUES**

• Economic development is one of the basic support services recommended for all people with mental illness living in the community. This would include job training, individual development accounts, etc.
• Monitor and follow the CCD housing task force recommendations issued annually concerning federal housing appropriations.

**PRINCIPLES**

The underpinning of federal and state housing policy for people with disabilities.

1. **Equity in Housing Resources** - People with disabilities must receive an equitable share of the federal housing resources available within a framework that considers the extent of their unmet housing needs in relation to the existing inventory of housing resources available to them.

2. **Expanding Housing Supply** - Increasing the supply of affordable housing for people with disabilities should be achieved primarily within the context of a community's affordable housing activities and facilitated through generic and traditional housing providers including community based non-profit groups as well as for-profit housing developers/managers.

3. **Inclusion/Integration** - People with disabilities must be able to live in and fully participate in all aspects of community living by having the choice of non-stigmatizing housing opportunities that are integrated within communities and neighborhoods.

4. **Non-discrimination** - People with disabilities have the right to be free from discrimination in housing both in the rental and home ownership markets and in local zoning and land use policies.

5. **Housing Choice** - People with disabilities must have a choice of community housing options, which reflect their personal values, needs, and housing preferences.

6. **Affordability** - Due to their extremely low incomes, people with disabilities must have access to affordable housing.

7. **Quality, Safety and Accessibility** - All housing acquired or created for people with disabilities must be decent and safe. Federal housing policy should also ensure an adequate supply of accessible housing.

8. **Access** - People with disabilities have the right to access housing on a variety of levels: as individuals, as members of communities, and as constituents of the affordable housing delivery system.

9. **Promote separation of Housing from Services** - Federal housing policy for people with disabilities must promote the separation of housing from support services by emphasizing the desire and ability of people with disabilities to assume the roles and responsibilities of tenants and/or homeowners. To the greatest extent possible, consumers should not be coerced to accept treatment as a condition of gaining housing.
10. **Empowerment** - As housing consumers and customers, people with disabilities advocates, and service providers must be empowered to fully participate in all activities related to federal and state housing programs and policies, including community based planning, housing development and rehabilitation, and housing management.

**HOUSING FACTS IN NEW JERSEY**

New Jersey is the most expensive place in the nation to rent a two-bedroom apartment (National Low Income Housing Coalition, Out of Reach Report, 2000).

A family needs to earn over $35,000 a year to afford the fair market rent of $878 for a two-bedroom apartment. Forty-four per cent of New Jersey families who rent cannot afford this (National Low Income Housing Coalition, Out of Reach Report, 2000).

The New Jersey Department of Labor projects that for the year 2006, four out of every ten jobs (41 %) will be in low-wage occupations, meaning jobs earning under $25,000 a year (New Jersey Employment and Population in the 21st Century, July 1998: Projections 2006).

A minimum wage worker in New Jersey would have to work the equivalent of three full-time jobs to afford the typical two-bedroom apartment (National Low Income Housing Coalition, Out of Reach Report, 2000).

More than 900,000, or one third of all New Jersey families, live in homes that are excessively expensive, overcrowded or substandard (State of New Jersey Comprehensive Affordability Strategy 1994).

Additionally 288,000 families or ten per cent, pay more than half of their income for housing (State of New Jersey Comprehensive Affordability Strategy 1994).

The Department of Community Affairs receives three times more application for funding for affordable housing than there is funding available (Department of Community Affairs, 1998).

At least 25,000 individuals face homelessness in any given year in New Jersey (State of New Jersey Comprehensive Affordability Strategy 1994).